

**§ 2139. Opioid Overdose Reversal Medication – Standing Order Permitted.**

(a)(1) A practitioner may prescribe, dispense, distribute, and deliver an opioid overdose reversal medication:

(i) directly to a person at risk of experiencing an opioid-related overdose;

or

(ii) by prescription, collaborative drug therapy agreement, standing order, or protocol to a first responder, family member, or other person or entity in a position to assist a person at risk of experiencing an opioid-related overdose.

Any such prescription, standing order, or protocol is issued for a legitimate medical purpose in the usual course of professional practice.\*

(2) At the time of prescribing, dispensing, distributing, or delivering the opioid overdose reversal medication, the practitioner shall inform the recipient that as soon as possible after administration of the opioid overdose reversal medication, the person at risk of experiencing an opioid-related overdose should be transported to a hospital or a first responder should be summoned.

(b) A pharmacist may dispense an opioid overdose reversal medication pursuant to a prescription, collaborative drug therapy agreement, standing order, or protocol issued in accordance with subsection (a)(1) of this section and may administer an opioid overdose reversal medication to a person at risk of experiencing an opioid-related overdose. At the time of dispensing an opioid overdose reversal medication, a pharmacist shall provide written instructions on the proper response to an opioid related overdose, including instructions for seeking immediate medical attention. The instructions to seek immediate medical attention must be conspicuously displayed.

(c) Any person or entity may lawfully possess, store, deliver, distribute, or administer an opioid overdose reversal medication pursuant to a prescription, collaborative drug therapy agreement, standing order, or protocol issued by a practitioner in accordance with subsection (a) of this section.

(d) The following individuals, if acting in good faith and with reasonable care, are not subject to criminal or civil liability or disciplinary action under Health Care Professions Licensing Act for any actions authorized by this section or the outcomes of any actions authorized by this section.

(1) A practitioner who prescribes, dispenses, distributes, or delivers an opioid overdose reversal medication pursuant to subsection (a) of this section;

(2) A pharmacist who dispenses an opioid overdose reversal medication pursuant to subsection (b) or (e)(1) of this section;

(3) A person who possesses, stores, distributes, or administers an opioid overdose reversal medication pursuant to subsection (c) of this section.

(e) The Chief Medical Officer may issue a standing order prescribing opioid overdose reversal medications to any person at risk of experiencing an opioid-related overdose or any person or entity in a position to assist a person at risk of experiencing an opioid-related overdose. The standing order may be limited to specific areas in the CNMI or CNMI wide.

(1) A pharmacist shall dispense an opioid overdose reversal medication pursuant to a standing order issued in accordance with this subsection, consistent with the pharmacist's responsibilities to dispense prescribed legend drugs, and may administer an opioid overdose reversal medication to a person at risk of experiencing an opioid-related overdose. At the time of dispensing an opioid overdose reversal medication, a pharmacist shall provide written instructions on the proper response to an opioid-related overdose, including instructions for seeking immediate medical attention. The instructions to seek immediate medical attention must be conspicuously displayed.

(2) Any person or entity may lawfully possess, store, deliver, distribute, or administer an opioid overdose reversal medication pursuant to a standing order issued in accordance with this subsection (e). The Commonwealth Health Care Corporation, in coordination with the appropriate entity or entities, shall ensure availability of a training module that provides training regarding the identification of a person suffering from an opioid-related overdose and the use of opioid overdose reversal medications. The training must be available electronically and in a variety of media from the Commonwealth Health Care Corporation.

(3) This subsection (e) does not create a private cause of action. Notwithstanding any other provision of law, neither the CNMI nor the Chief Medical Officer has any civil liability for issuing standing orders or for any other actions taken pursuant to this chapter or for the outcomes of issuing standing orders or any other actions taken pursuant to this chapter. Neither the Chief Medical Officer is subject to any criminal liability or professional disciplinary action for issuing standing orders or for any other actions taken pursuant to this section.

(4) For purposes of this subsection (e), "standing order" means an order prescribing medication by the Chief Medical Officer. Such standing order can only be issued by a practitioner as defined in this chapter.

(f) The labeling requirements of 3 CMC § 2733 do not apply to opioid overdose reversal medications dispensed, distributed, or delivered pursuant to a prescription, collaborative drug therapy agreement, standing order, or protocol issued in accordance with this section. The individual or entity that dispenses, distributes, or delivers an opioid overdose reversal medication as authorized by this section shall ensure that directions for use are provided.

(g) For purposes of this section, the following terms have the following meanings unless the context clearly requires otherwise:

(1) "Chief Medical Officer" means the chief medical officer of the Commonwealth Health Care Corporation.

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(2) “First responder” means: emergency service employees, firefighters, police officers or other law enforcement officers, emergency medical services personnel, EMT, Advanced EMT, and paramedics and other emergency responders who render emergency medical services at the scene of an emergency.

(3) “Opioid overdose reversal medication” means any drug used to reverse an opioid overdose that binds to opioid receptors and blocks or inhibits the effects of opioids acting on those receptors. It does not include intentional administration via the intravenous route.

(4) “Opioid-related overdose” means a condition including, but not limited to, decreased level of consciousness, non-responsiveness, respiratory depression, coma, or death that:

(i) Results from the consumption or use of an opioid or another substance with which an opioid was combined; or

(ii) a lay person would reasonably believe to be an opioid-related overdose requiring medical assistance.

(5) “Practitioner” means a health care practitioner who is authorized under 6 CMC § 2138 to prescribe controlled substances.

(6) “Standing Practitioner” means a health care practitioner who is authorized under 6 CMC § 2138 to prescribe controlled substances.

\* So in original.

**Source:** PL 23-23, § 3 (July 18, 2024), modified.